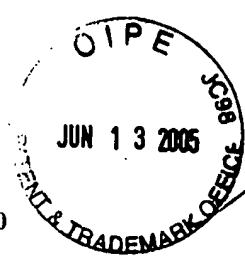


PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23364 7590 06/09/2005

BACON & THOMAS, PLLC
625 SLATERS LANE
FOURTH FLOOR
ALEXANDRIA, VA 22314

Attn: Justin J. Cassell, Esq.

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/702,447	11/07/2003	Arni Thor Ingimundarson	INGI3002/JEK/JJC	9711

TITLE OF INVENTION: ANKLE-FOOT ORTHOSIS

06/14/2005 HALI22 00000012 10702447

01 FC:1501	APPLN. TYPE	SMALL ENTITY DISCOUNT	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
02 FC:1504						
03 FC:8001	nonprovisional		\$1400	\$300	\$1700	09/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DAHBOUR, FADI H	3743	602-027000

<p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</p> <p><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</p>	<p>2. For printing on the patent front page, list</p> <p>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,</p> <p>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</p> <p>1. Bacon & Thomas, PLLC</p> <p>2. _____</p> <p>3. _____</p>
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

OSSUR HF

Reykjavik, Iceland

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

<p>4a. The following fee(s) are enclosed:</p> <p><input checked="" type="checkbox"/> Issue Fee</p> <p><input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted)</p> <p><input checked="" type="checkbox"/> Advance Order - # of Copies <u>Four (4)</u></p>	<p>4b. Payment of Fee(s):</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee(s) is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number <u>02-0200</u> (enclose an extra copy of this form).</p>
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature <u>Justin J. Cassell</u>	Date <u>June 13, 2005</u>
Typed or printed name <u>Justin J. Cassell</u>	Registration No. <u>46,205</u>

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: A. INGIMUNDARSON

SERIAL NO.: 10/702,447

FILED: November 7, 2003

FOR: Ankle-Foot Orthosis



GROUP ART UNIT: 3743

EXAMINER: Fadi H. Dahbour

ATTY. REFERENCE: INGI3002/JEK/JJC

COMMISSIONER FOR PATENTS

P.O. BOX 1450

Alexandria, VA 22313-1450

Sir:

The below identified communication(s) or document(s) is(ar e) submitted in the above application or proceeding:

- | | |
|--|--|
| <input type="checkbox"/> Declaration | <input checked="" type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Priority Document | <input checked="" type="checkbox"/> Check in the Amount of \$1,712 (\$1400-issue fee; |
| <input type="checkbox"/> Formal Drawings | \$300-publication fee; \$12-advance order fee) |
| <input type="checkbox"/> Small Entity Declaration(s) | <input type="checkbox"/> Assignment, including cover sheet and fee of \$ |

☒ Please debit or credit **Deposit Account Number 02-0200** for any deficiency or surplus in connection with this communication. A duplicate copy of this sheet is provided for use by the Deposit Account Branch.

Customer 23364

BACON & THOMAS, PLLC

625 SLATERS LANE - FOURTH FLOOR

ALEXANDRIA, VIRGINIA 22314

(703) 683-0500

Respectfully submitted,

JUSTIN J. CASSELL

Attorney for Applicant

Registration Number: 46,205

DATE: June 13, 2005